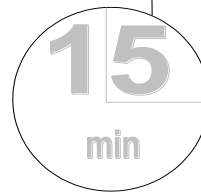


CLiP

15 minute Worksheet



Helping the patient with reduced hydration and nutrition

3: Enriching and fortifying the diet

Intermediate level

Produced by
St. Oswald's Hospice
Regent Avenue
Gosforth
Newcastle-upon-Tyne
NE3 1EE

Tel: 0191 285 0063
Fax: 0191 284 8004

This version written and edited by:

Rachel Skinner, Lead Dietitian;
Dorothy Mathews Macmillan Nurse for People with Learning Disability;

Lynn Gibson Manager of Northumberland Physiotherapy service (LD)
Northumberland Tyne & Wear NHS Foundation Trust

Claud Regnard Honorary consultant in Palliative Care Medicine, St. Oswald's Hospice

Aim of this worksheet

To understand how the diet can be enriched and supplemented in a person who is eating less and losing weight.

How to use this worksheet

- You can work through this worksheet by yourself, or with a tutor.
- Read the case study below, and then turn to the Work page overleaf.
- Work any way you want. You can start with the exercises on the Work page using your own knowledge. The answers are on the Information page - this is not cheating since you learn as you find the information. Alternatively you may prefer to start by reading the Information page before moving to the exercises on the Work page.
- This CLiP worksheet should take about 15 minutes to complete, but will take longer if you are working with colleagues or in a group. If anything is unclear, discuss it with a colleague.
- If you think any information is wrong or out of date let us know.
- Take this learning into your workplace using the activity on the back page.

Case study

Ben is a tall, 33-year-old man, who has moderate learning disability together with hydrocephalus, spastic diplegia, visual impairment and epilepsy. He enjoys life but his plan to settle in a small group community home was halted when he was diagnosed as having a carcinoma of the kidney with lung metastases. He is normally well nourished but staff are now concerned about maintaining Ben's adequate nutritional status. He has lost 4kg and now weighs 64kg. Because he is very tall (2m), his Body Mass Index (BMI) is low at 16.

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Planning nutritional support

Malnutrition can adversely affect a person's health and wellbeing (See CLIP Work sheet 'Balancing the diet'). Nutrition support describes the strategies available to help compensate for an inadequate dietary intake. This work sheet considers nutrition support that can be given orally including fortified diet, nourishing snacks/drinks and prescribed nutritional supplements.

Nutrition Screening, using the Malnutrition Universal Screening Tool (MUST), is a process that can be used to check if a person is at risk of malnutrition. A record of current and past weights is ideally required to complete MUST. The process involves calculating (Body Mass Index) B.M.I and also percentage weight loss. The BAPEN website provides a guide to using MUST and a quick calculator so you can simply add in weights and heights to calculate a person's risk: <http://www.bapen.org.uk/musttoolkit.html>

If you put Ben's details (see case study front of this sheet) in the MUST calculator it will identify him as 'high risk' of malnutrition as he is under weight BMI of 16 and has unintentionally lost 6% of his body weight.

Food First

If a person is accepting small meals or snacks regularly then there is potential to improve a person's nutritional status using normal foods and drinks. This process involves ensuring high quality nourishing meals (See CLIP Worksheet 'Balancing the diet') and also boosting calories to help compensate for the smaller intake:

Fortify foods and drinks where possible, examples include:

- Milk powder is pure protein, whisk 4 tablespoons (60g) into one pint of full-cream milk along with 50ml of cream. This fortified milk can then be used where possible; on cereal, to make up dessert whips, milk puddings or sauces and to make up drinks such as milk shake, hot chocolate, Horlicks and coffee. Alternatively, nourishing drinks that can be bought include Build- Up and Complian.
- Add cream, custard, evaporated milk, ice-cream, jam or syrup to puddings, fruit and desserts.
- Sugar can be added to breakfast cereal and fruit.
- Add grated cheese, margarine, butter or mayonnaise to mashed or jacket potatoes. To vegetables add margarine, butter or a creamy sauce.

Include snacks between meals and at supper, examples could include:

- Sweet: teacake, scone, crumpet or malt loaf spread with butter and jam. Small cakes such as mini éclair, mini rolls or doughnuts. Small desserts such as mousse, trifle, crème caramel, rice pudding, creamy yoghurt. Fancy biscuits and chocolate.
- Savoury: Mini sausage roll or scotch egg, slice of quiche or pizza, cheese and crackers, dainty sandwiches, crisps and dips.
- Include fortified foods and drinks regularly throughout the day. If a person is maintaining their weight with a lot of high calorie foods and drinks but you feel the diet is unvaried, possibly not eating a lot of fruit and vegetables, consider introducing a multivitamin supplement.

Prescribed nutritional supplements

Requiring prescription by a doctor, supplements usually take the form of drinks taken between meals. They are useful if nourishing diet alone is failing to stabilise a person's weight and often become essential if a person's diet is very poor but they are still drinking well. There are many different types; milk shake style, fruit juice style, soup style and pre-thickened for people that need thickened drinks. An assessment by a dietician can help identify if supplements are required and which types would meet nutritional needs best.

Making clinical decisions with Ben

The overriding need is for Ben to maintain adequate nutrition and comfort whilst ensuring a good quality of life.

- **Identify and address any underlying causes of poor intake:** anxiety or depression, breathlessness, swallowing problems, weakness or disability preventing intake, constipation, nausea and vomiting, infection or odour, drugs (causing nausea, mucosal irritation or gastric stasis), poor food presentation.
- **Is Ben's nutritional status poor or deteriorating?** Consider fortifying and supplementing Ben's diet with the ideas above. Assess progress by monitoring weight, fluid and food intake.
- **Can the anorexia be helped by corticosteroids?** Useful if a brief (1-4 week) effect is wanted. Dexamethasone 2 – 4mg once in the morning may help (see CLIP worksheet *The Cachexia Syndrome*).

Fill the gaps

Below is a typical day's intake for Ben. What easily available foods could you use to add extra calories and nutrients to Ben's food? Lunch and supper have been completed for you to show how small actions can make a big difference to calorie intake!

Mealtime	Typical Intake	Improved Intake (you write in ideas)
Breakfast	Weetabix with semi-skimmed milk Coffee	
Mid-morning	Cup of tea with semi-skimmed milk A plain biscuit	
Lunch	Tomato soup and a bread roll Low fat yoghurt (Total calories=236)	Tomato soup <u>with cream added</u> and a small <u>ham roll spread with butter</u> <u>Thick and creamy</u> yoghurt (Total Calories <u>598</u>)
Mid-afternoon	Coffee with semi- skimmed milk and sweetener Banana	
Dinner	1/2 a Lasagne- microwave type meal (healthy eating range) Plain jelly dessert	
Supper	Cup of tea with semi-skimmed milk A plain biscuit (Total calories=43)	Small mug <u>of Horlicks made with full-cream milk</u> <u>1 buttered crumpet</u> (Total Calories= <u>419</u>)

List

There are many prescribed nutritional supplements on the market. List as many as you can and how they could be added to Ben's diet.

Reflect

Think about how these supplements could be included in Ben's diet. What factors, other than food, might influence Ben's nutritional intake?

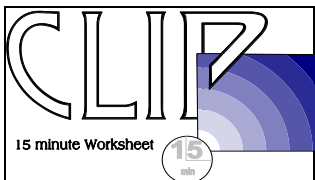
FURTHER ACTIVITY: Enriching and fortifying the diet

Select a person who you think has lost weight. Complete the MUST screening and ask them to keep a chart of their intake over the week. Use the food record as a basis to discuss ways to boost nutrient and calorie intake.

FURTHER READING: Enriching and fortifying the diet

Journal articles

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- Sarhill N, Mahmoud FA, Christie R, Tahir A. Assessment of nutritional status and fluid deficits in advanced cancer. *American Journal of Hospice and Palliative Medicine*. 2003; **20**(6): 465–73.
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- van der Riet P, Good P, Higgins I, Sneesby L. Palliative care professionals' perceptions of nutrition and hydration at the end of life. *International Journal of Palliative Nursing*. 2008; **14**(3): 145–51.
- Williams J, Copp G. Food presentation and the terminally ill. *Nursing Standard*, 1990; **4**:29-32.



15 minute Worksheet

Current Learning in Palliative care

An accessible learning programme for health care professionals

15 minute worksheets are available on:

- An introduction to palliative care
- Helping the patient with pain
- Helping the patient with symptoms other than pain
- Moving the ill patient
- Psychological and spiritual needs
- Helping patients with reduced hydration and nutrition
- Procedures in palliative care
- Planning care in advance
- Understanding and helping the person with learning disabilities
- The last hours and days
- Bereavement

Available online on
www.clip.org.uk